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TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>	Application Number	10/700,247
	Filing Date	11/03/2003
	First Named Inventor	THOMPSON, Alvin D.
	Art Unit	1774
	Examiner Name	N/A

Total Number of Pages in This Submission

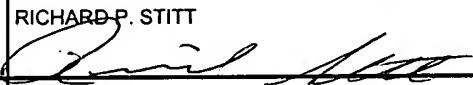
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Attorney Docket Number

DTS001/109492

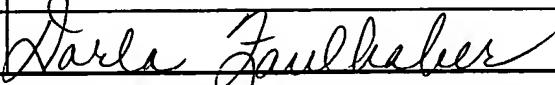
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Firm or Individual name	RICHARD P. STITT 
Signature	
Date	JUNE 11, 2004

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PTO/SB/82 (09-03)

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**REVOCATION OF POWER OF
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Application Number	10/700,247
Filing Date	11/03/2003
First Named Inventor	THOMPSON, Alvin Dean
Art Unit	1774
Examiner Name	Not Yet Assigned
Attorney Docket Number	DTS001/109492

I hereby revoke all previous powers of attorney given in the above-identified application.

A Power of Attorney is submitted herewith.

OR

I hereby appoint the practitioners associated with the Customer Number: 24030

Please change the correspondence address for the above-identified application to:

The address associated with Customer Number: 24030

OR

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Address			
Address			
City	State	Zip	
Country			
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I am the:

Applicant/Inventor.
 Assignee of record of the entire interest. See 37 CFR 3.71.
 Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Name	Alvin Dean Thompson	
Signature		
Date	6-9-04	Telephone

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

*Total of 2 forms are submitted.

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OR

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Individual Name

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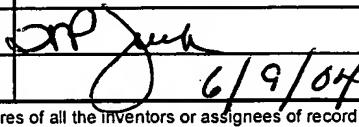
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Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Name William P. Junk, President

Signature 

Date 6/9/04

Telephone

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

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